

**IN THE SPECIFICATION:**

Please amend the paragraph bridging pages 7-8 of the Specification as follows:

The podiatrist is then able to examine the bone formation of the client and, in particular, whether the orientation of the heel whilst standing is substantially vertical so as to properly transmit the forces generated by walking, running, etc. If, for example, the right heel is out of vertical (pronation or supination), then the podiatrist is able to adjust the turn buckle 34 as indicated in Fig. 7 so as to raise or lower the tilt arm lever 32. As indicated in Fig. 7 this simultaneously both rotates the heel support 29 about the heel-toe axis of the patient's foot, and also translates the heel support 28 transversely to that axis because of the inter-engagement of the teeth on the racks 25, 30. In this way, the heel support 29 can be adjusted by the podiatrist to correct any malalignment of the patient's right heel. In the course of this adjustment, the right foot of the patient is normally twisted to a certain extent and this generally throws the front portion (forefoot) of the patient's foot out of the desired alignment. As indicated in Fig. 6, the stirrup 39 is now able to be moved in the directions indicated by arrow E in Fig. 6. This has ~~to~~ two effects, firstly to rotate the front portion of the patient's foot so as to correct any malalignment and secondly to move the stirrups 39 transverse to the heel-toe axis as necessary. This movement is performed manually by the podiatrist grasping the corresponding lug 40. Once the correct orientation for the forefoot is achieved the stirrup 39 is held in position by means of a block 45 as seen in Fig. 6. As also seen in Fig. 6, each stirrup 39 has a curved bottom surface which is able to both pivot and slide over the bench top 2. The upper surface of the stirrup bottom is flat to receive the corresponding foot plate 35, 36.